MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/517578 **FILING DATE**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52						
3		2		1			53						
4		(1)		1			54						
5			1				55						
6				1			56						
7				1			57						
8				1			58						
9				1			59						
10			1				60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
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36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		↓	3	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		←	7	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS		▓▓▓	10	▓▓▓		▓▓▓	TOTAL CLAIMS		▓▓▓		▓▓▓		▓▓▓

PTO - 1360 (REV. 11/04)